

**CITY OF BURLINGTON
DEPARTMENT OF
RECREATION AND PARKS
YOUTH BASEBALL
REGISTRATION
SPRING/SUMMER 2006**

REGISTRATION FEES (UNTIL MARCH 27, 2006)
\$15.00-1st child, \$12.00-2nd child, \$10.00-3rd child - RESIDENTS
\$45.00-1st child, \$40.00-2nd child, \$35.00-3rd child - NON-RESIDENTS
FEES AFTER MARCH 27, 2006- \$22.00 Burlington City Residents
\$65.00 Non-Residents

This fee must be paid when you register.

Deadline: March 27, 2006 – No Refunds after May 5, 2006

THE LEAGUE SET UP IS AS FOLLOWS:

T-BALL LEAGUE * (Must be 5 by June 30) *	BOYS & GIRLS WHO ARE NOT 7 BEFORE AUGUST 1, 2006
PEE WEE LEAGUE (Coach Pitch)	BOYS & GIRLS WHO ARE NOT 9 BEFORE AUGUST 1, 2006
MITE	BOYS WHO ARE NOT 11 BEFORE AUGUST 1, 2006
MIDGET	BOYS WHO ARE NOT 13 BEFORE AUGUST 1, 2006
INTERMEDIATE	BOYS WHO ARE NOT 15 BEFORE AUGUST 1, 2006
JUNIOR	BOYS WHO ARE NOT 19 BEFORE AUGUST 1, 2006

*****THE RECREATION AND PARKS DEPARTMENT RESERVES THE RIGHT TO ADJUST
THE ABOVE AGE GROUPINGS IF THERE ARE NOT ENOUGH PARTICIPANTS IN A
PARTICULAR AGE GROUP SO EVERYONE IS OFFERED THE CHANCE TO PLAY*****

CHILD'S NAME: _____ MALE/FEMALE: _____

ADDRESS: _____

CITY/ZIP _____

HOME PHONE NUMBER: _____ BIRTH DATE: (MONTH/DAY/YEAR) _____

HAS YOUR CHILD PLAYED ANY BASEBALL WITH US BEFORE? YES _____ NO _____

If yes list team name, coach and year: _____

ELEMENTARY SCHOOL DISTRICT YOUR CHILD LIVES IN: _____

TEAM REQUESTED: (NOT GUARANTEED) _____

LEAGUE DESIRED: _____

(IF REQUESTED TO PLAY IN A HIGHER LEAGUE A CHANGE OF LEAGUE REQUEST FORM MUST BE FILLED OUT)

Will Parent coach or assist in coaching a team? Yes _____ No _____ Please indicate head or assistant

and what the team name and league is: _____

Please indicate any physical conditions of the participant that the coach should be aware of: _____

Parents' or Guardians' Names: (Please print) _____

By signing below you agree to hold harmless the City of Burlington for any physical injuries your child may incur while playing recreational baseball/softball. You agree that baseball/softball is a strenuous activity in which accidents may happen.

Parents' or Guardians' Signature: _____

-----FOR OFFICE USE ONLY-----	
FEE PAID \$ _____	BIRTH DATE VERIFIED (Y/N) _____